## Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

247196US 25 DV

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			1		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMB	NUMBER EXTRA		BASIC FEE	<del> </del>	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			minus 20=		* @			VC 0			VC40		
					* 8		·	X\$ 9=	<u> </u>	OR	X\$18=		
INDEPENDENT CLAIMS			<u> </u>	nus 3 =				X43=	<u> </u>	OR	X86=	_	
М	JETIPLE DEPE	NDENT CLAIM P	HESENI					+145=		OR	+290=	_	
* 11	the difference	in column 1 is	less than zero, enter "0" in column 2			1	TOTAL		OR	TOTAL	770		
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
	1	(Column 1)	1	(Colun		(Column 3)	l r	SMALL		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO PAID F	BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		= .		X43=		OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+145=		OR	+290=		
								TOTAL		OB	TOTAL ADDIT. FEE		
		(Column 1)	. *	ADDIT. FEE			ADDII. PEE						
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		(Colum HIGHE NUME PREVIO PAID F	EST BER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=	÷	OR	X86=		
٩	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				CLAIM		╽┟	+145=		Un			
									1	OR	+290=		
										OR ,	TOTAL ADDIT. FEE	<u> </u>	
(Column 1) (Column 2) (Column 3)													
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***		=		X43=		OR	X86=	:	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		ı			
* 6	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+290= TOTAL		
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ADI										OR ,	TOTAL ADDIT. FEE		
		ber Previously Paid					r four	nd in the app	ropriate box	in colu	ımn 1.		